

Approved For Release 2000/08/23 : CIA-RDP79-00434A000200010046-8
 REQUISITION FOR SUPPLIES, EQUIPMENT, OR SERVICE

FOR SERVICES USE ONLY

REQUISITION NO.

APPROVED BY

Page _____ of _____ Pages

THIS DATE

OFFICE

ACCOUNT NO. _____ CHARGE ALLOTMENT NO. _____

150

NOTE: See Instructions on reverse side.

DELIVER TO

I certify that the items indicated hereon are required for use in the public service.

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(SIGNATURE OF ACCOUNTABLE OR RESPONSIBLE OFFICER)

(SIGNATURE OF APPROVING OFFICIAL)

RECEIPT (To be completed after delivery of items or service.)

I certify that the quantities of items and/or services itemized below have been received in serviceable condition except as otherwise noted.

(DATE)

(SIGNATURE OF RECIPIENT)

ITEM NO.	STOCK NO.	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1.		Adrenalin Chloride 1:1000 Solution 1 oz.	4	bott.		
2.		Aureomycin Capsules 16 per bottle	35	bott.		
3.		Bath Soap (Cake)	200	ea.		
4.		Belladonna, Tincture of Ft.	1	ea.		
5.		Compound Cathartic Pills 1200 per bott.	1	ea.		
6.		Cormaine Solution 45 cc.	1	bott.		
7.		Ether, 1 lb. can	12	can		
8.		I.V. Saline (1000 cc. bottle)	20	ea.		
9.		Morphine Syringes 1 gr.	50	ea.		
10.		Penicillin Suspension, 300,000 units, Disposable Syringes	100	ea.		
11.		Pentothal Sodium 0.5 gm. Amp. (Pkg. of 25) and 25 -20 cc. Amp. of water for injection		Pkg.		
12.		Spiritus Frumenti (Seagram 7.0.) Fifths	14	ea.		
13.		Irradiated Human Plasma, Dried (A.M.-67-104) 25		ea.		
14.		Sulfathiazole 5% with Metresana eye ointment 10		tube		

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 EXPRESS PARCEL POST

GOVERNMENT B/L NO.

TOTAL

SERVICES AUDIT

DATE BY

INSTRUCTIONS

Approved For Release 2000/08/23 : CIA-RDP79-00434A000200010046-8
Complete and type this form. The number of copies required and the addressees of various types of requisitions are contained in Administrative Instruction No. 40-1.

FOR SERVICES USE ONLY**REMARKS:**

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 REQUISITION FOR SUPPLIES, EQUIPMENT, OR SERVICE

FOR SERVICES USE ONLY
 REQUISITION NO. 434A000200010046-8

APPROVED BY

NOTE: See Instructions on reverse side.

DELIVER TO

I certify that the items indicated hereon are required for use in the public service.

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RESPONSIBLE OFFICER)

(SIGNATURE OF APPROVING OFFICIAL)

Page	of	Pages
THIS DATE		
OFFICE		
Medical Division	ACCOUNT NO.	CHARGE ALLOTMENT NO.
	123	

RECEIPT (To be completed after delivery of items or service.)

I certify that the quantities of items and/or services itemized below have been received in serviceable condition except as otherwise noted.

(DATE)

(SIGNATURE OF RECIPIENT)

ITEM NO.	STOCK NO.	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
15.		Bandage, Elastic, 3" x 5' yds.	10	ea.		
16.		Batteries, Flashlight, No. 2 Cell	10	ea.		
17.		Absorbent Cotton, 1 lb.	4	ea.		
18.		Blankets, Wool, (White)	40	ea.		
19.		Bulbs, Flashlight, Screw, 2.5v	10	ea.		
20.		Cups, Eye	2	ea.		
21.		Medicine Droppers	6	ea.		
22.		Enema Set (Fountain Syringe)	1	ea.		
23.		Glass, Drinking 8oz.	10	ea.		
24.		Glass, Medicine	6	ea.		
25.		Pillows, Bed	12	ea.		
26.		Plaster, Adhesive, Waterproof, 2" x 5 yds	30	ea.		
27.		Splint, Wire 3-3/4" x 30" Unit No. 116 (Medical Supply Co., Rockford, Ill.)	20	ea.		
28.		Teaspoon	12	ea.		
29.		Scissors, Blister	100	ea.		

FOR SERVICES USE ONLY

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SERVICES AUDIT

DATE BY

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Approved For Release 2000/08/23 : CIA-RDP79-00434A000200010046-8

FORM NO. 36-7
 Apr 1950

INSTRUCTIONS

Approved For Release 2000/08/23 : CIA-RDP79-00434A000200010046-8
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 REQUISITION FOR SUPPLIES, EQUIPMENT, OR SERVICE

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Page 1 of 1 Pages
 THIS DATE

OFFICE

Medical Division
 ACCOUNT NO. 120 ALLOTMENT NO.

NOTE: See Instructions on reverse side.

DELIVER TO

I certify that the items indicated herein are required for use in the public service.

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RESPONSIBLE OFFICER)

(SIGNATURE OF APPROVING OFFICIAL)

RECEIPT (To be completed after delivery of items or service.)

I certify that the quantities of items and/or services itemized below have been received in serviceable condition except as otherwise noted.

(DATE)

(SIGNATURE OF RECIPIENT)

ITEM NO.	STOCK NO.	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
30.		Towels, Hand	60	ea.		
31.		Towels, Bath	420	ea.		
32.		Basin, Brass	4	ea.		
33.		Basin, Hand 12 1/2" x 7"	8	ea.		
34.		Container, with lid, quart, metal w/o	6	ea.		
35.		Comb, folding, wood-canvas	12	ea.		
36.		Flashlight, metal	9	ea.		
37.		Yankauer Inhaler, Anesthesia	4	ea.		
38.		Pan, Instrument, Small 3 1/2" x 7" x 1 1/2"	4	ea.		
39.		Sphygmomanometer, Aneroid	4	ea.		
40.		Stethoscope, (Ford)	4	ea.		
41.		Litters, (Stretchers)	6	ea.		
42.		Surgical Instruments, Operating Field Small (AN 9-520-200)	1	ea.		
43.		Surgical Linen and Supply Kit (Navy) Field Medical Kit, Unit No. 24(AN 9-520-225)	2	ea.		

FOR SERVICES USE ONLY

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SERVICES AUDIT

DATE BY

INSTRUCTIONS

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(SIGN)

INSPECTOR OFFICER

(SIGNATURE OF APPROVING OFFICIAL)

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(DATE)

(SIGNATURE OF RECIPIENT)

ITEM NO.	STOCK NO.	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
44.		Table Operating, folding, M2, (AN 7-092-176) 2	2	ea.		
45.		Tray, Instrument 7 1/2" x 12" x 2"	2	ea.		
46.		Table, Instrument (Alo 85 P 6310)	1	ea.		
47.		Steriliser, Electric, Castle, C-416	1	ea.		
48.		Oxygen Tank and Mask (A.S. Alo, portable, Puritan Pressure reducing regulator, tank fittings, 220 Cu.ft. tank or cylinder	2	ea.		
49.		Intravenous Set, Sterile (AN3-426-800) (For I.V. Saline)	2	ea.		
50.		Bag, Physician, Empty, Leather, Boston Type (AN 3-088-200)	2	ea.		
51.		Blood Bank Set, Indirect Blood Transfusion M2, (AN 3-103-400)	1	ea.		
52.		Blood Donor Set, Indirect Blood Transfusion, M2 (AN 3-103560)	12	ea.		
53.		Blood Recipient Set, Indirect Blood Transfusion M2 (AN 3-103-610)	12	ea.		

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Page 1 of 1 Pages
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[REDACTED] RESPONSIBLE OFFICER)

(SIGNATURE OF APPROVING OFFICIAL)

OFFICE Medical Division
 ACCOUNT NO. 120 CHARGE ALLOTMENT NO.

RECEIPT (To be completed after delivery of items or service.)

120

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(DATE)

(SIGNATURE OF RECIPIENT)

ITEM NO.	STOCK NO.	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
54.		Microscope, Spensor, Monocular (Alo 85L56021)	1	ea.		
55.		Counting Chamber Set (Levy-Hausser)	2	ea.		
56.		Catheter 14 Fr.	4	ea.		
57.		Catheter 16 Fr.	4	ea.		
58.		Catheter 18 Fr.	4	ea.		
59.		Double Action Bulb (For Re-evacuating Blood Donor Bottles) (Alo 85L71940)	12	ea.		
60.		Hemoglobinometer (Feden-Hausser) (Alo 85L11610)	2	ea.		
61.		Refrigerator, 4 Cu. Ft.	1	ea.		
62.		Tetanus Toxoid, 7.5cc.	40	vial		
63.		Tetanus Antitoxin, 1500 units	30	ea.		
64.		Typhoid Paratyphoid, 15cc.	40	cc.		
65.		Smallpox Vaccine, 10 per box	20	box		
66.		Gas-Gangrene Antitoxin	20	cc.		
67.		Rochester Pressure Autoclaven (Alo 85P-666)	1	ea.		

FOR SERVICES USE ONLY

REQUISITION NO.	REQUISITION DATE	OFFICE	REQUISITIONED BY
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TOTAL

SERVICES AUDIT

DATE 16-62102-1 BY

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FREIGHT MAIL
 EXPRESS PARCEL POST

GOVERNMENT B/L NO.

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FOR SERVICES USE ONLY
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Medical Division

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SERVICES AUDIT

DATE | BY

1000 J. Neurosci., November 1, 2006 • 26(44):9992–10003

FORM NO. 36-7
Apr 1950

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